

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>06/12/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>RSD</i>		<i>6/15/00</i>
FORMALITY REVIEW	<i>LA</i>	<i>66390</i>	<i>6/19/00</i>
RESPONSE FORMALITY REVIEW		<i>66390</i>	<i>6/19/00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
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7	✓	✓	✓
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11	✓	✓	✓
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Claim	Final	Original	Date
44	✓	✓	✓
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Claim	Final	Original	Date
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147	✓	✓	✓
148	✓	✓	✓
149	✓	✓	✓
150	✓	✓	✓

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)